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Application Number 10/768,293

Filling Date 01/29/2004

First Named Inventor RABINOWITZ, Joshua D.

Art Unit 1616

Examiner Name HAGHIGHATIAN, Mina

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 7

Attorney Docket Number 00035.09CON

Tota	al Number of	Pages in This Submission			00035.090	JON			
ENCLOSURES (Check all that apply)									
	Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application  Reply to Missing Parts under 37 CFR 1.52 or 1.53		Drawing(s)  Licensing-related Papers				After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC		
				Petition Petition to Convert to a Provisional Application Power of Attorney, Revocat Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C	e Address		(Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):		
			Remarks  PTO/SB/26 Terminal Disclaimer (1 pp.)  PTO/SB/25 Terminal Disclaimer (1 pp.)  PTO/SB/17 Fee Transmittal (1 pp., 2 copies)  Response to Office Action (2 pp.)  Return Postcard						
		SIGNA	TURE	OF APPLICANT, ATT	ORNEY, C	R AG	ENT		
Firm N	Firm Name ALEXZA Molecular Delivery Corporation, 1001 E. Meadow Circle, Palo Alto, CA 94303						303		
			erel	n hemby					
Printed name William L. Leschensky									
Date	Date February 14, 2005		Reg. No.		38,951				
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William L. Leschensky

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February 14, 2005

PTO/SB/17 (12-04v2)
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Effective on 12/08/2004. For the ursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).	Complete if Known			
Ecoto Grsuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/768,293		
FEE TRANSMITTAL	Filing Date	01/29/2004		
For FY 2005	First Named Inventor	RABINOWITZ, Joshua D.		
7 A - 1	Examiner Name	HAGHIGHATIAN, Mina		
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1616		
TOTAL AMOUNT OF PAYMENT (\$) 130.00	Attorney Docket No.	00035.09CON		

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 502731 Deposit Account Name: ALEXZA Molecular Delivery  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments							
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FEE CALCULATION							
1. BASIC FILING, SEA	FILING		SEARCH	I FEES		TION FEES	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims  Small Entity Fee (\$) Fee (\$) 25 20 100 100 180						<u>Fee (\$)</u> 25	
Total Claims	Extra Clair	ns Fee (\$)	Fee P	aid (\$)			ependent Claims
- 20 or HP =		_ x	_=			Fee (\$)	Fee Paid (\$)
HP = highest number of tota Indep. Claims  - 3 or HP = HP = highest number of inde	Extra Clair	<u>ns</u> <u>Fee (\$)</u> x	Fee Pa	aid (\$)			
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)							
Other (e.g., late filin	g surcharge	): <u>2 - Terminal Dis</u>	claimers 37	CFR 1.20(d)			\$130.00

SUBMITTED BY			-
Signature	Wille & Ferchensky	Registration No. (Attorney/Agent) 38,951	Telephone (650) 687-3926
Name (Print/Type)	William L. Leschensky		Date February 14, 2005

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